



Analytical Laboratory
13339 Hagers Ferry Road
Huntersville, NC 28078-7929
McGuire Nuclear Complex – MG03A2
Phone: 704-875-5245 Fax: 704-875-4349

Job Summary Report

Job Number: 10-FEB-0027

Project Name: NPDES 1st Week
Customer Name: J.R. Wood
Copy To: Sue Wallace
Customer Address: Miami Fort

Lab Contact: Theron James
Lab Contact Phone: 704-875-4795

Report Authorized By: (Printed Name) THERONA JAMES

Report Authorized By: (Signature) Theron James Date: 2/12/10

Data Package

This data package includes analytical results that are applicable only to the samples described in this narrative. An estimation of the uncertainty of measurement for the results in the report is available upon request. This report shall not be reproduced, except in full, without the written consent of the Analytical Laboratory. Please contact the Analytical Laboratory with any questions. The order of individual sections within this report is as follows:

Job Summary Report
Analytical Laboratory Certificate of Analysis
Analytical Laboratory QC Reports (if applicable)
Sub-contracted Laboratory Results
Customer Specific Data Sheets, Reports & Documentation (if applicable)
Customer Database Entries
Test Case Narratives
Chain of Custody (COC)

Job Summary Report

Certification

The Analytical Laboratory holds the following Certifications:

New York State Department of Health Certification # 11717(NELAC)
North Carolina Department of Health & Human Services Certification # 37804
South Carolina (DHEC) Laboratory ID # 99005
North Carolina (DENR) Certification # 248

Analytical results listed in this report may not be certified by the authorities referenced above. Contact the Analytical Laboratory for definitive information about the certification status of specific methods. The results meet all requirements of NELAC except where deviations are noted in this report.

Data Flags

Any analytical tests or individual analytes within a test flagged with an "X" or a "1" indicate a deviation from the method quality system or quality control requirement.

Calculations

All results are reported on a wet weight basis unless otherwise noted.

Sample ID's & Descriptions:

| Sample ID | Plant/Station | Collection Date | Collected By | Sample Description |
|-----------------|---------------|--------------------|--------------|-----------------------|
| 30001625 | MIAMI FORT | 2/01/2010 | MATTHEW DORN | OUTFALL 002 |
| 30001626 | MIAMI FORT | 2/02/2010 | MATTHEW DORN | OUTFALL 608 |
| <hr/> | | | | |
| 2 TOTAL SAMPLES | | | | |
| <hr/> | | | | |

Job Summary Report

Validation of Analytical Data Package

- i) COC and .pdf report are in agreement with sample totals and analyses (compliance programs and procedures). ☒ Yes ☐ No
- ii) All results are less than the laboratory reporting limits. ☐ Yes ☒ No
- iii) All laboratory QA/QC requirements are acceptable. ☒ Yes ☐ No
- iv) NPDES and TCLP results are below permit or regulatory limits respectively. ☒ Yes ☐ No

If iv) above is No, document below:

| Variable | Result | Permit Limit | Notes |
|----------|--------|--------------|-------|
| | | | |
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| | | | |
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| | | | |
| | | | |

- v) Components of the Job Summary Report arranged in order stipulated on page one. ☒ Yes ☐ No

Indicate components included:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Job Summary Report | <input type="checkbox"/> Customer Specific Data Sheets, Reports & Documentation (if applicable) |
| <input checked="" type="checkbox"/> Analytical Laboratory Certificate of Analysis | <input type="checkbox"/> Customer Database Entries |
| <input type="checkbox"/> Analytical Laboratory QC Report (if applicable) | <input type="checkbox"/> Test Case Narratives |
| <input type="checkbox"/> Sub-contracted Laboratory Results | <input checked="" type="checkbox"/> Chain of Custody |

- vi) Notes and Additional Information



MIAMI FORT

Certificate of Laboratory Analysis

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Analytical Laboratory

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2 Samples
17 Tests

Included in this Report

Lab ID: **30001625** Sample Desc: **OUTFALL 002**

Sample Collected: 2/1/2010 09:44:00

Collected By: MATTHEW DORN

Customer ID: WOOD / WALLACE

Date Initiated in Lab: 2/1/2010 09:13:37

TOTAL DISSOLVED SOLIDS (EPA)

Data Posted: 2/4/2010 14:50:24

Method: SM2540D

TDS 840 mg/L

Reporting Limit Flag

10 0

Lab ID: **30001626** Sample Desc: **OUTFALL 608**

Sample Collected: 2/2/2010 07:47:00

Collected By: MATTHEW DORN

Customer ID: WOOD / WALLACE

Date Initiated in Lab: 2/1/2010 09:15:27

ALKALINITY (FIXED END POINT 4.5)

Data Posted: 2/9/2010 17:23:18

Method: SM2320B

ALKALINITY 1100 mg-CaCO3/L

Reporting Limit Flag

0.10 0

ARSENIC BY ICP-MS (DIGESTED)

Data Posted: 2/5/2010 12:32:20

Method: EPA 200.8/6020

ARSENIC < 1.00 ug/L

Reporting Limit Flag

1.00 0

BARIUM BY ICP-MS (DIGESTED)

Data Posted: 2/5/2010 12:32:21

Method: EPA 200.8/6020

BARIUM 9.00 ug/L

Reporting Limit Flag

1.00 0

BORON BY ICP (DIGESTED)

Data Posted: 2/9/2010 15:26:07

Method: EPA 200.7/6010B

BORON 323 mg/L

Reporting Limit Flag

1.00 0

CADMIUM BY ICP-MS (DIGESTED)

Data Posted: 2/5/2010 12:32:21

Method: EPA 200.8/6020

CADMIUM < 1.00 ug/L

Reporting Limit Flag

1.00 0

CHLORIDE (IC)

Data Posted: 2/5/2010 07:40:32

Method: EPA 300.0

CHLORIDE 9000 mg/L

Reporting Limit Flag

100 0

CHROMIUM BY ICP-MS (DIGESTED)

Data Posted: 2/5/2010 12:32:21

Method: EPA 200.8/6020

CHROMIUM < 1.00 ug/L

Reporting Limit Flag

1.00 0

COPPER BY ICP-MS (DIGESTED)

Data Posted: 2/5/2010 12:32:21

Method: EPA 200.8/6020

COPPER < 1.00 ug/L

Reporting Limit Flag

1.00 0

FLUORIDE (IC)

Data Posted: 2/5/2010 07:40:33

Method: EPA 300.0

FLUORIDE 14 mg/L

Reporting Limit Flag

10 0

IRON BY ICP (DIGESTED)

Data Posted: 2/9/2010 15:26:07

Method: EPA 200.7/6010B

IRON 0.635 mg/L

Reporting Limit Flag

0.0100 0



MIAMI FORT

Certificate of Laboratory Analysis

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Analytical Laboratory

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2 Samples
17 Tests

Included in this Report

Lab ID: **30001626** Sample Desc: **OUTFALL 608**

Customer ID: WOOD / WALLACE

Sample Collected: 2/2/2010 07:47:00

Collected By: MATTHEW DORN

Date Initiated in Lab: 2/1/2010 09:15:27

LEAD BY ICP-MS (DIGESTED)

Data Posted: 2/5/2010 12:32:21

Method: EPA 200.8/6020

LEAD < 2.00 ug/L

Reporting Limit **Flag**

2.00 0

MANGANESE BY ICP (DIGESTED)

Data Posted: 2/9/2010 15:26:07

Method: EPA 200.7/6010B

MANGANESE 0.966 mg/L

Reporting Limit **Flag**

0.00500 0

SULFATE (IC)

Data Posted: 2/5/2010 07:40:34

Method: EPA 300.0

SULFATE 8400 mg/L

Reporting Limit **Flag**

100 0

TOTAL DISSOLVED SOLIDS (EPA)

Data Posted: 2/4/2010 14:50:25

Method: SM2540D

TDS 29000 mg/L

Reporting Limit **Flag**

10 0

TOTAL SUSPENDED SOLIDS (EPA)

Data Posted: 2/3/2010 17:25:54

Method: SM2540D

TSS 24 mg/L

Reporting Limit **Flag**

4.0 0

ZINC BY ICP-MS (DIGESTED)

Data Posted: 2/5/2010 12:44:53

Method: EPA 200.8/6020

ZINC < 2.00 ug/L

Reporting Limit **Flag**

2.00 0



DUKE ENERGY ANALYTICAL LABORATORY
MAIL CODE MCO3A2 (BUILDING 7405)
13339 HAGERS FERRY RD
HUNTERSVILLE, N. C. 28078
(704) 875-5245
FAX: (704) 875-4349

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Customer must Complete

| | |
|--|----------------|
| 1) Project Name MIAMI-FORT NPDES Monthly (Monthly Sampling - February 2) | 2) Phone No: |
| 3) Client Miami-Fort - J.R. Wood, Sue Wallace | 4) Fax No: |
| 5) Business Unit: | 6) Process: |
| 7) Resp. Center To: | 8) Project ID: |
| 9) Activity ID: | 10) Mail Code: |

| |
|---|
| 11) Lab ID 3001635 3001636 |
| Customer to complete appropriate columns to right |

| 12) Chem Desktop No. | 13) Sample Description or ID | 14) Collection Information | 15) Preserv.: 1=HCL 2=H ₂ SO ₄ , 3=HNO ₃ 4=Ice 5=None | 16) Analyses Required | 17) Comp. | 18) Grab | TDS | Cl, F, SO ₄ | As, Fe, Ba, B, Mn, Zn, Cd, Pb, Cr, Cu | TSS, Alkalinity |
|-------------------------|------------------------------|----------------------------|--|--------------------------|-----------|----------|-----|------------------------|---|-----------------|
| | Outfall 002 | 2/12/10 09:44 | | | X | X | 1 | 1 | 1 | 1 |
| | Outfall 608 | 2/12/10 07:47 | | | X | X | 1 | 1 | 1 | 1 |

Customer to sign & date below - fill out from left to right.

| | |
|-------------------------------------|-------------------------------------|
| 1) Relinquished By [Signature] | 2) Accepted By [Signature] |
| 3) Relinquished By [Signature] | 4) Accepted By [Signature] |
| 5) Relinquished By [Signature] | 6) Accepted By [Signature] |
| 7) Relinquished By [Signature] | 8) Accepted By [Signature] |
| 9) Seal/Locked By [Signature] | 10) Seal/Unlocked By [Signature] |
| 11) Seal/Unlocked By [Signature] | 12) Seal/Locked By [Signature] |

Customer, IMPORTANT!
Please indicate desired turnaround.

| |
|--------------------------|
| 22) Requested Turnaround |
| 14 Days _____ |
| 7 Days _____ |
| 48 Hr _____ |
| Other _____ |
| * Add. Cost Will Apply |

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DISTRIBUTION
ORIGINAL TO LAB,
COPY TO CLIENT